843400

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Basiness Link) Harriey				
(Document Number)				
Certified CopiesCertificates of Status				
Special Instructions to Filing Officer:				



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OL MAY 10 PH 12: 20
SECRETARY OF STATE ATT AHASSEE, FLORIDA

PREMIER CORPORATE SERVICES, INC.

208 South LaSalle Street, Suite 1855 Chicago, IL 60604 (312) 346-3606 (800) 934-2556 Fax: (312) 346-3607

May 4, 2004

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State 409 E. Gaines Street Tallahassee, FL 32399

RE: Todd & Sargent, Inc.

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Tony Alexander

TA/smc. Encl.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607 itted for a corporation organized under the law	·	tes, this statement ofin order
to change its re	gistered office or registered agent, or both, in th	ne State of Florida.	
1. The name of	the corporation: Todd & Sargent, Inc.		
2. The principal	office address: 620 Arrasmith Trail, Ames,	IA 50010	<u> </u>
	**		
3. The mailing a	address (if different):		
		, k , , , , , + , , + , , + , , + , + ,	<u> </u>
4. Date of incor	poration/qualification: 6/8/79	Document number: 843400	···
	d street address of the current registered agent a street of State:	nd registered office on file with th	TALLAND T
	Don Springer	<u> </u>	
	562 Pine Grove Lane		SSE
	Naples, FL 33940		TE PH IS
6. The name and (if changed):	d street address of the new registered agent (if c	hanged) and /or registered office	: 20 TATE ORIDA
	NRAI Services, Inc.		
	526 E. Park Avenue (P.O. Box or personal mailbox	NOT amentable)	<u></u>
	Tallahassee, FL 32301	ive i deseptionly	
		TEXA 7	
The street addr changed will be	ess of its registered office and the street addre	ss of the business office of its re	gistered agent, as
Such change w the board, or th	as authorized by resolution duly adopted by it e corporation has been politica in writing of t	is board of directors or by an offi he change.	cer so authorized by
()	Signature of an officer of director)	Jerry Murphy, CFO	•
aunes, una 1 an being filed mer	the appointment as registered agent and agri- to comply with the provisions of all statutes ri- n familiar with and accept the obligation of me ely to reflect a change in the registered office wiriting of this change.	ee to act in this capacity. elative to the proper and comple y position as registered agent. (address, I hereby confirm that th	te performance of my Fr, if this document is ne corporation has
by: W	of the	May 4,2004 (Date)	
If signing on b	(Signature of Registered Agent) chalf of an entity:	(Date)	
Anthony J. Al		Asst. Secretary	
	(Typed or Printed Name)	(Capacity	}